



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

We Protect Hoosiers and Our Environment.

Mitchell E. Daniels, Jr.
Governor

Thomas W. Easterly
Commissioner

100 North Senate Avenue
Indianapolis, Indiana 46204
(317) 232-8603
Toll Free (800) 451-6027
www.idem.IN.gov

March 15, 2010

VIA CERTIFIED MAIL

7000 0520 0023 5044 5324

Mr. Brent K. Bilsland, President
Sunrise Coal, LLC
1183 E. Canvasback Drive
Terre Haute, Indiana 47802

Dear Mr. Bilsland:

Re: Modification Request for
NPDES General Permit No. ING040199
IDNR Permit No. U-028
Sunrise Coal Carlisle Mine
1466 East State Road 58
Carlisle, Indiana
Sullivan County

Your NPDES permit Notice of Intent application received February 15, 2010 requesting modification of the above-referenced permit, has been reviewed. The submittal requested that coverage be granted for new outfall 004 (latitude 39°, 00', 06", longitude 87°, 23', 49") discharging to an unnamed tributary to Middle Fork Creek. The request has been processed in accordance with Section 402 and 405 of the Federal Water Pollution Control Act, as amended (33 U.S.C. 1251, et seq.), and IDEM's permitting authority under IC 13-15. Our office has determined that the addition of the new outfall will not affect Sunrise Coal Carlisle Mine's eligibility for coverage under the general permit rules outlined in 327 IAC 15-1 through 15-4 and 327 IAC 15-7, Facilities Engaged in Mining of Coal, Coal Processing, and Reclamation Activities, nor will the additional outfall point affect the site's ability to meet the reporting requirements. Therefore your petition to add the new outfall has been approved in accordance with Indiana Rules promulgated under 327 IAC15-7. Coverage for the facility will now include all outfalls listed on Attachment 1 to this correspondence.

The NPDES general permit identification number assigned to this facility in the previous approval will continue to apply, as will all other testing and reporting that are required under 327 IAC 15-7 using the forms that were sent to you previously. An additional form is attached to this letter for use with this new outfall. You should duplicate it as needed. Should you need additional copies of this form it is also available on the internet at the following web site:

<http://www.in.gov/idem/5104.htm>

327 IAC 15-7 is also available on the internet at the following website:

Mr. Brent Bilsland, President

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<http://www.in.gov/idem/4087.htm>

Additionally, you will continue to receive the computer generated preprinted federal NPDES DMR forms. Both the state and federal forms need to be completed and submitted on a routine basis. If you do not receive the preprinted DMR forms in a timely manner, please call this office at (317)-232-8670.

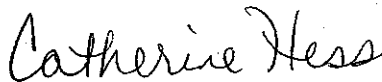
These modifications shall become effective on **April 1, 2010**, unless a person aggrieved or adversely affected by the acceptance appeals this decision. Coverage under 327 IAC 15-7 for all remaining outfalls remains effective, and will expire on **October 31, 2014**. In order to receive authorization to discharge beyond the date of expiration, the permittee shall submit such information and forms as required by the Indiana Department of Environmental Management no later than ninety (90) days prior to the date of expiration.

Please note that any person who is adversely affected or aggrieved by approval under the cited NPDES general permit rule may, within eighteen (18) days from the mailing date of this notification, appeal this acceptance by filing a written petition for administrative review with the Office of Environmental Adjudication, in accordance with IC 4-21.5-3-7. This petition constitutes a request for an adjudicatory hearing. The procedure for appeal is outlined in more detail on the attached page.

The Office of Environmental Adjudication will provide parties who request review of this approval with notice of prehearing conferences, preliminary hearings, hearing, and stays or orders disposing of all proceedings. Nonparties may receive such notices without intervening and formally becoming parties in the proceeding by requesting copies of such notices from the Office of Environmental Adjudication.

If you have any questions regarding this letter, please contact Ms. Sheri L. Jordan of our office at (317) 232-8703.

Sincerely,



Catherine Hess, Chief
Permits Administration Section
Office of Water Quality

Slj/

Attachment

cc: Sullivan County Health Department

ATTACHMENT 1

Sunrise Coal Carlisle Mine

NPDES PERMIT NO. ING040199

IDNR PERMIT NUMBER U-028, U-028-2

EFFECTIVE DATE: **April 1, 2010**

OUTFALLS PERMITTED FOR THIS FACILITY

OUTFALL	DNR BASIN	LATITUDE	LONGITUDE	MINE DRAINAGE STATUS	RECEIVING WATER
001	U-028 001	38°, 56', 25"	87°, 23', 14"	UNDETERMINED	Unnamed tributary to Marsh Creek
002	U-028 002	38°, 56', 24"	87°, 24', 00"	UNDETERMINED	Unnamed tributary to Marsh Creek
003	U-028-2 003	38°, 56', 34"	87°, 22', 09"	UNDETERMINED	Marsh Creek
004**	U-028 004	39°, 00', 06"	87°, 23', 49"	UNDETERMINED	Unnamed tributary to Middle Fork Creek

** Outfall 004 is not yet constructed

STATE OF INDIANA
DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

PUBLIC NOTICE NO. 2010 - 3D -GP

DATE OF NOTICE: March 15, 2010

The Office of Water Quality issues the following NPDES GENERAL PERMIT.

MODIFICATION

SUNRISE COAL CARLISLE MINE, Permit No. ING040199, SULLIVAN COUNTY, Carlisle, IN. This facility will discharge non-process wastewater from a coal mining, processing and reclamation site that discharges to an unnamed tributary to Middle Fork Creek. This modification is being issued because the company is adding 1 Outfall. The Notice of Intent (NOI) letter submitted complies with the requirements in 327 IAC 15-7, Facilities Engaged in Mining of Coal, Coal Processing and Reclamation Activities. Permit Writer: Sheri Jordan at 317/232-8703.

PROCEDURES TO APPEAL

General Permit documents are available for inspection at IDEM, Office of Water Quality/Permit Section, IGCN, 100 N Senate Ave, Indianapolis, IN, Room 1203, from 9 - 4, Monday-Friday (copies 10¢ per page). The General Permit is also available at the local Health Department. Please tell others you think would be interested in this matter.

Appeal Procedure: Any person affected by the issuance of the Final Permit may appeal by filing a Petition for Administrative Review with the Office of Environmental Adjudication within eighteen (18) days of the date of this Public Notice. Any appeal request must be filed in accordance with IC 4-21.5-3-7 and must include facts demonstrating that the party requesting appeal is the applicant; a person aggrieved or adversely affected or is otherwise entitled to review by law.

Timely filing: The Petition for Administrative Review must be received by the Office of Environmental Adjudication (OEA) within 18 days of the date of this Public Notice; either by U.S. Mail postmark or by private carrier with dated receipt. This Petition for Administrative Review represents a request for an Adjudicatory Hearing, therefore must:

- state the name and address of the person making the request;
- identify the interest of the person making the request;
- identify any persons represented by the person making the request;
- state specifically the reasons for the request;
- state specifically the issues proposed for consideration at the hearing;
- identify the Final Permit Rule terms and conditions which, in the judgment of the person making the request, would be appropriate to satisfy the requirements of the law governing this NPDES Permit rule.

If the person filing the Petition for Administrative Review desires any part of the NPDES Final Permit Rule to be stayed pending the outcome of the appeal, a Petition for Stay must be included in the appeal request, identifying those parts to be stayed. Both Petitions shall be mailed or delivered to the address here:
Phone: 317/232-8591.

Environmental Law Judge
Office of Environmental Adjudication
IGC - North Building- Rm 501
100 N. Senate Avenue
Indianapolis IN 46204

Stay Time frame: If the Petition (s) is filed within eighteen (18) days of the mailing of this Public Notice, the effective date of any part of the permit, within the scope of the Petition for Stay is suspended for fifteen (15) days. The Permit will become effective again upon expiration of the fifteen (15) days, unless or until an Environmental Law Judge stays the permit action in whole or in part.

Hearing Notification: Pursuant to Indiana Code, when a written request is submitted, the OEA will provide the petitioner or any person wanting notification, with the Notice of pre-hearing conferences, preliminary hearings, hearing stays or orders disposing of the Petition for Administrative Review. Petition for Administrative Review must be filed in compliance with the procedures and time frames outlined above. Procedural or scheduling questions should be directed to the OEA at the phone listed above.



OFFICE OF
WATER QUALITY
200 FEB 15 10 3 02

I. PURPOSE OF SUBMITTAL:				
Please check one box. Also provide existing permit number and reason for modification if applicable. You may attach additional sheets if they are needed.				
NEW	RENEW	MODIFY	EXISTING PERMIT NO.	IF MODIFICATION WHAT IS CHANGING
		X	ING040199	Adding an Outfall

II. GENERAL INFORMATION									
Complete all boxes in sections a and b for name of company and person who is to receive the permit. Complete boxes in sections c, d, e, f, g, h, and i or fill in N/A for non-applicable as they apply for the facility that the permit is to apply to.									
a. APPLICANT NAME (TO THE ATTENTION OF)				e. FACILITY SIC CODE		f. FACILITY COUNTY		g. DNR FACILITY NUMBER	
Scott A. Gambill				1222		Sullivan		U-28	
b. APPLICANT'S COMPANY AND COMPLETE MAILING ADDRESS				h. LATITUDE AND LONGITUDE OF APPROXIMATE FACILITY CENTER					
COMPANY NAME				Latitude			Longitude		
Sunrise Coal, LLC									
STREET ADDRESS				degree	minute	second	degree	minute	Second
1183 E Canvasback Drive									
CITY		STATE	ZIP CODE						
Terre Haute		IN	47802	38	56	36	87	23	32
c. FACILITY NAME				i. FACILITY TOWNSHIP, RANGE, SECTION, QUARTER SECTION					
				Township		Range		Section	
CARLISLE MINE				6N		9W		22	
								NE 1/4	
d. FACILITY MAILING ADDRESS				j. FACILITY PHYSICAL LOCATION IF DIFFERENT FROM iId					
STREET ADDRESS				STREET ADDRESS					
1466 E SR 58									
CITY		STATE	ZIP CODE	CITY		STATE		ZIP CODE	
Carlisle		IN	47838						

III. CONTACT INFORMATION AUTHORIZED SIGNATORY	
This section applies to the responsible corporate officer and/or alternate person who is Authorized to be responsible for all signatory responsibilities for the facility under 327 IAC 15-4-3 (g). Please complete all boxes or mark N/A for non-applicable.	
a. APPLICANT SIGNATORY CONTACT PERSON AND TITLE	d. ALTERNATE PERSON TO ANSWER QUESTIONS
Brent K. Bilsland, President	Scott A. Gambill
b. APPLICANT SIGNATORY CONTACT PERSON TELEPHONE	e. ALTERNATE PERSON'S TELEPHONE
812.299.2800 ext. 202	812.398.2200 ext. 109
c. APPLICANT EMAIL ADDRESS	f. ALTERNATE PERSON'S EMAIL ADDRESS
bbilsland@sunrisecoal.com	sgambill@sunrisecoal.com

IV. CONTACT INFORMATION OTHER:

DISCHARGE MONITORING REPORTS CONTACT AND MAILING INFORMATION		c. <u>CONTACT AND COMPANY NAME</u> Sunrise Coal, LLC	
a. <u>CONTACT TELEPHONE NUMBER</u> 812.398.2200		d. <u>STREET ADDRESS</u> 1466 E SR 58	
b. <u>CONTACT EMAIL ADDRESS</u> selder@sunrisecoal.com		e. <u>CITY</u> Carlisle	f. <u>STATE</u> IN
ANNUAL FEE AND FINANCIAL CONTACT AND BILLING ADDRESS		g. <u>ZIP CODE</u> 47838	
		j. <u>COMPANY AND CONTACT PERSON NAME</u> Sunrise Coal, LLC	
h. <u>CONTACT TELEPHONE NUMBER</u> 812.299.2800		k. <u>STREET ADDRESS</u> 1183 E Canvasback Dr	
i. <u>CONTACT EMAIL ADDRESS</u> dbradbury@sunrisecoal.com		l. <u>CITY</u> Terre Haute	m. <u>STATE</u> IN
OTHER CONTACT AND MAILING INFORMATION (SPECIFY BELOW)		n. <u>ZIP CODE</u> 47802	
		q. <u>COMPANY AND CONTACT PERSON NAME</u>	
o. <u>CONTACT TELEPHONE NUMBER</u>		r. <u>STREET ADDRESS</u>	
p. <u>CONTACT EMAIL ADDRESS</u>		s. <u>CITY</u>	t. <u>STATE</u>
		u. <u>ZIP CODE</u>	

V. RULE QUALIFICATION:

The purpose of this rule is to regulate wastewater discharges from surface mining, underground mining, and reclamation projects which utilize sedimentation basin treatment for pit dewatering and surface run-off and to require best management practices for storm water run-off.

Does this facility meet these requirements? (please check one) **YES** ☒ **NO** ☐

Please provide a brief description of the facility operation that results in the discharge. You may attach additional sheets.

This new outfall location will serve as a sedimentation pond to collect surficial precipitation run-off from a topsoil stockpile, parking area, supply storage yard, hoist, and office building.

VI. OUTFALL INFORMATION: Please fill out the following information FOR ALL OUTFALLS

a. DNR OUTFALL NO.	b. LATITUDE			c. LONGITUDE			d. DRY WEATHER BASE FLOW	e. MINE DRAINAGE STATUS	g. Is this discharge to a STORM SEWER	f. Name of RECEIVING WATER OR if g is YES name of OPERATOR OF MUNICIPAL STORM SEWER, AND WATER IT DISCHARGES TO
	deg.	min.	sec.	deg.	min.	sec.				
001A	38	56	25	87	23	14	0	Active	Y / <input checked="" type="radio"/> N	Tributary to Marsh Creek
002A	38	56	24	87	24	00	0	Active	Y / <input checked="" type="radio"/> N	Tributary to Marsh Creek
003A	38	56	34	87	22	09	0	Active	Y / <input checked="" type="radio"/> N	Marsh Creek
004A	39	00	06	87	23	49	0	Not Yet Constructed	Y / <input checked="" type="radio"/> N	Tributary to Middle Fork Creek
									Y / N	
									Y / N	
									Y / N	
									Y / N	
									Y / N	

VII. OUTFALL INFORMATION FOR MODIFICATIONS: Please provide the following if this is a request to ADD, DELETE, or CHANGE MINE DRAINAGE STATUS of one or more outfalls:

a. IDEM OUTFALL NO.	b. DNR basin and outfall NO.	c. DEL, ADD, CHANGE	d. DATE OF CHANGE	e. REASON FOR THE CHANGE: EXPLAIN IN DETAIL AND ATTACH CONFIRMING DOCUMENTATION IN THE FORM OF INSPECTORS REPORTS, LAB DATA, ETC.
004A	Pond 1	ADD		See Part V.

VIII. TOPOGRAPHICAL MAP

A topographical map must be submitted with this application. The map must include the following items:

- (A) the location of the coal mining operation, including contiguous facility property lines, shown clearly and identified by name and by mark;
- (B) the location of each numbered outfall shown clearly and identified by number and by mark;
- (C) the receiving streams and tributaries to them that each outfall discharges to shown clearly and identified by name;
- (D) any existing permanent structures or roads in the area shown clearly and identified by name.

Please attach this completed map to the application and submit both together.

IX. PROOF OF PUBLICATION

It is required that a public notice statement be published in a newspaper of largest circulation in the area where the discharge(s) will be occurring. This publication must be in the newspaper for a minimum of one day and must include the following language: (your facility name, address, address of the location of the discharging facility, and the streams receiving the discharge(s)) "is submitting a Notice of Intent letter to notify the Indiana Department of Environmental Management of our intent to comply with the requirement under 327 IAC 15-7 to discharge wastewater associated with the mining of coal, coal processing and /or reclamation activities. Any person aggrieved by this action may appeal in writing to the Environmental Law Judge of the Office of Environmental Adjudication for an adjudicatory hearing on the question of whether this facility should operate under this NPDES general permit rule. An appeal must be postmarked no later than fifteen (15) days from the date of this public notice. Such a written request for an adjudicatory hearing must:

- (A) state the name and address of the person making the request;
- (B) identify the interest of the person making the request;
- (C) identify any persons represented by the person making the request;
- (D) state with particularity the reasons for the request;
- (E) state with particularity the issues proposed for consideration at the hearing; and
- (F) state with particularity the reasons why the NPDES general permit rule should not be available to the discharger identified in this notice.

Any such request shall be mailed or delivered to:
 Office of Environmental Adjudication
 Indiana Government Center – North
 100 North Senate Avenue, Room N501
 Indianapolis, Indiana 46204"

Please attach proof of publication of this statement from the newspaper to the application and submit both together.

X. POTENTIALLY AFFECTED PERSONS FORM

Pursuant to IC 4-21.5 it is required that a Potentially Affected Person form be completed and submitted with this application. The form and instructions are attached.

Please fill out this form in its entirety and submit it with the application.

XI. REQUIRED FEES:

A \$50 application fee is required to be submitted with applications for new permits, permit modifications, and permit renewals in accordance with IC 13-18-20-12. In addition the \$500 annual fee is required to be submitted for NEW APPLICATIONS at the time of submitting the application.

Please list amount submitted \$ 50.00, attach to and submit with application.
Checks or money orders shall be made payable to IDEM.

XII. NOTIFICATION OF INDIANA DEPARTMENT OF NATURAL RESOURCES

It is required in all circumstances that a copy of this application is sent to the Indiana Department of Natural Resources (IDNR) Division of Reclamation in Jasonville, Indiana.

Please forward a copy of this application as is required and identify the party to whom it was addressed and the date that it was mailed: _____

XIII. CERTIFICATION STATEMENT

It is required by 327 IAC 15-4-3(g)(3) that the following statement shall be included in the application. The authorized signatory representative (as defined by 327 IAC 15-5-3(g)(2) and identified in item IIIa above) makes the following certification by signing and dating this section of the application below:

"I certify under penalty of law that this document and all its attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Brent K. Bilsland, President

812.299.2800

Name and official title (type or print)

Area Code and phone No.

Brent K. Bilsland
Signature

2-10-10
Date signed

Submit completed form and attachments to the following address:

**Indiana Department of Environmental Management
Office of Water Quality – Mail Code 65-42
NPDES Permits Section
100 North Senate Avenue
Indianapolis, Indiana 46204-2251**

